



FEMA

Flood Insurance Agent Manual Newly Mapped Rules – Excerpts

I. GENERAL DESCRIPTION

The Newly Mapped procedure applies to properties previously in Zones B, C, X, D, AR, or A99 that have been newly mapped into a Special Flood Hazard Area (SFHA). The Newly Mapped procedure does not apply to properties mapped into the SFHA by the initial Flood Insurance Rate Map (FIRM).

For 1–4 family dwellings, the maximum coverage combination is \$250,000 building and \$100,000 contents. For other residential buildings, the maximum coverage combination is \$500,000 building and \$100,000 contents. Up to \$100,000 contents – only coverage is available for all residential properties.

For non-residential business, and other non-residential properties, the maximum coverage combination is \$500,000 building and \$500,000 contents. Up to \$500,000 contents-only coverage is available.

Only 1 building can be insured per policy, and only 1 policy with building coverage can be written on each building except in the case of a Residential Condominium Building Association Policy (RCBAP) and a condominium unit owner dwelling policy.

II. ELIGIBILITY REQUIREMENTS

A. Eligibility

To be eligible for coverage under the Newly Mapped procedure, the building must meet the following criteria:

- Properties newly mapped into an SFHA on or after April 1, 2015, are eligible for the Newly Mapped procedure if the applicant obtains coverage that is effective within 12 months of the map revision date and if the property does not fall under any of the categories of Ineligible properties. Refer to the ineligibility subsection in this section of the manual.
- If a property located in an AR or A99 zone is insured under the PRP, and is later remapped to an SFHA excluding AR and A99, it will be eligible to use the Newly Mapped procedure.

For the purpose of determining the flood zone, the agent/producer may use the FIRM in effect at the time of application and presentment of premium.

B. Occupancy

Combined building/contents amounts of insurance are available for owners of all eligible occupancy types — 1–4 family properties (including individual condominium units in residential condominium buildings), other residential properties, and non-residential business, and other non-residential properties.

Contents-only coverage is available for tenants and owners of all eligible occupancies, except when contents are located entirely in a basement.

C. Loss History

A building's eligibility for the Newly Mapped procedure is based on the preceding requirements and on the building's flood loss history. If any of the following conditions exists within any 10-year period, regardless of any change(s) in ownership of the building, then the building is not eligible for the Newly Mapped procedure:

- 2 flood insurance claim payments for separate losses, each more than \$1,000; or
- 3 or more flood insurance claim payments for separate losses, regardless of amount; or
- 2 Federal flood disaster relief payments (including loans and grants) for separate occurrences, each more than \$1,000; or
- 3 Federal flood disaster relief payments (including loans and grants) for separate occurrences, regardless of amount; or
- 1 flood insurance claim payment and 1 Federal flood disaster relief payment (including loans and grants), each for separate losses and each more than \$1,000.

NOTE: Multiple losses at the same location within 10 days of each other are counted as 1 loss, with the payment amounts added together.

TABLE 1. PROPERTIES NEWLY MAPPED INTO AN SFHA COVERAGE LIMITS

COVERAGE TYPE	MAXIMUM LIMITS BY OCCUPANCY TYPE		
	1–4 FAMILY	OTHER RESIDENTIAL	NON-RESIDENTIAL BUSINESS, OTHER NON-RESIDENTIAL
Combined Building/Contents	\$250,000/\$100,000	\$500,000/\$100,000	\$500,000/\$500,000
Contents Only	\$100,000	\$100,000	\$500,000

In determining a building's flood loss history for the Newly Mapped procedure, Federal flood disaster relief payments (including loans and grants) are considered only if the building sustained flood damage. A Newly Mapped property that becomes ineligible due to loss history must be renewed as a standard-rated policy. Renewal of a policy under the Newly Mapped procedure that does not qualify because of loss history is considered a misrating.

III. INELIGIBILITY

For help in determining eligibility/ineligibility of Various condominium risks, use the Condominium Rating Chart (Table 2) in this section.

Properties mapped into the SFHA for the first time by the initial FIRM for a community entering the Regular Program are not eligible for the Newly Mapped procedure.

A property is ineligible for the Newly Mapped procedure when the first policy effective date is more than 12 months after the effective date of the FIRM that revised the property's zone from a non-SFHA into an SFHA.

Buildings and/or contents in Emergency Program communities are not eligible for the Newly Mapped procedure.

Multi-unit residential condominium buildings eligible under the Residential Condominium Building Association Policy (RCBAP) are not eligible for the Newly Mapped procedure.

Buildings on Leased Federal Property determined by the Administrator to be located on the river-facing side of any dike, levee, or other riverine flood-control structure, or seaward of any seawall or other coastal flood-control structure are not eligible.

Policies that lapsed and are reinstated by means of a new application will not be eligible for the Newly Mapped procedure under the following conditions:

- The insured reinstates coverage on a building that was previously covered by a Standard Flood Insurance Policy (SFIP) that expired or was canceled;
- One or more of the named insureds on the new policy was either a named insured on the expired or canceled policy or had an ownership interest in the building at the time the policy expired or was canceled;
- The coverage was reinstated with premium received:
 - More than 90 days after prior policy expiration or cancellation where the named insured has maintained continuous coverage on the property

from April 1, 2016 to the prior policy expiration or cancellation date; *or*

- More than 30 days after the prior policy expiration or cancellation date, where the named insured has not maintained continuous coverage on the property from April 1, 2016 to the prior policy expiration or cancellation date; *and*
- The policy expiration or cancellation was for a reason other than that:
 - The insured was no longer legally required to obtain and maintain flood insurance; *or*
 - The insured property was in a community that was suspended from the NFIP and the policy was reinstated within 180 days of reinstatement of the community as a participant in the NFIP.

IV. DOCUMENTATION

A Preferred Risk Policy and Newly Mapped Application form must be used when applying for coverage under the Newly Mapped procedure. To determine eligibility, both the previous and current zones must each be documented with 1 or more of the items from the list below.

- A Letter of Map Amendment (LOMA);
- A Letter of Map Revision (LOMR);
- A Letter of Determination Review (LODR);
- A letter indicating the property address and flood zone of the building, and signed and dated by a local community official;
- An Elevation Certificate indicating the exact location and flood zone of the building, signed and dated by a surveyor, an engineer, an architect, or a local community official;
- A flood zone determination certification that guarantees the accuracy of the information; *or*
- A copy of the most recent flood map marked to show the exact location and flood zone of the building is also acceptable, though additional documentation may be required if the building is close to the zone boundary.

An agent/producer writing through a Write Your Own (WYO) Company should contact that company for guidance.

V. RENEWAL

An eligible risk renews automatically without submission of a new application. If, during a policy term, the risk fails to meet the eligibility requirements due to loss history, it cannot be renewed under the Newly Mapped

procedure. It must be non-renewed or rewritten as a standard-rated policy.

In order for a policy to remain eligible for the Newly Mapped procedure, a renewal payment must be received by the insurer within 30 days of the policy expiration date. For a policy renewing on or after April 1, 2016, if the renewal payment is received more than 30 days but within 90 days from the policy expiration date the coverage will be reinstated with a 30-day waiting period. The policy remains eligible to renew using the Newly Mapped procedure for only the first instance. For any subsequent renewals, if the renewal payment is received more than 30 days after the expiration date, the policy will be ineligible to renew using the Newly Mapped procedure and must be rated using full-risk rates.

If the renewal payment is received more than 90 days following the expiration date, the agent / producer must submit a new application with the full annual premium. The standard 30-day waiting period will apply and the policy will not be eligible for the Newly Mapped procedure.

After the initial policy year, a policy issued under the Newly Mapped procedure will begin the transition to full-risk rates. An insured may obtain an Elevation Certificate to determine whether full-risk rates are more favorable. The full-risk rates may be based on the current map or a grandfathered zone and/or Base Flood Elevation (BFE). For additional guidance, refer to the Rating section of this manual.

VI. COVERAGE LIMITATIONS

- Basement coverage limitations apply to a policy issued under the Newly Mapped procedure.
- Individual condominium units in non-residential condominium buildings are not eligible for building coverage.
- Condominium units insured under the Dwelling or General Property form are not eligible for Increased Cost of Compliance (ICC) coverage.

NOTE: Elevated building coverage limitations do not apply to a policy issued under the Newly Mapped Procedure.

VII. DEDUCTIBLES

The deductible for a Newly-Mapped-rated policy is \$1,000 each for both building and contents if the building coverage is less than or equal to \$100,000; if the building coverage is over \$100,000, the deductible is \$1,250, regardless of the insured building's construction date compared to the initial FIRM date. A contents-only policy will have a \$1,000 deductible.

VIII. ENDORSEMENTS

A Newly-Mapped-rated policy may be endorsed to:

- Increase coverage mid-term. See the General Change Endorsement section in this manual for an example.
- Correct misratings, such as those due to an incorrect building description or community number.

IX. CONVERSION OF A STANDARD-RATED POLICY TO A NEWLY-MAPPED-RATED POLICY DUE TO MISRATING

A policy written as a standard-rated policy after a map revision, and later found to be eligible for the Newly Mapped procedure may be endorsed or canceled and rewritten for up to 5 years from the date of the map revision. The appropriate multiplier based on the map revision date must be used to determine the amount due.

The policy may be canceled / rewritten using Cancellation Reason 22 if both of the following conditions are met:

- The request to endorse or cancel / rewrite the policy is received during the current policy term; *and*
- No claim has been paid or is pending on the policy term being canceled.

The building and/or contents coverage on the Newly-Mapped-rated policy must be equal either to the building limit and / or contents limit issued under the standard-rated policy, or to the next-higher limit available under the Newly-Mapped-rated policy if there is no Newly-Mapped-rated policy option equal to the standard-rated policy building and/or contents limit.

For a standard-rated contents-only policy, the contents coverage will be equal to the limit issued under the standard-rated policy or the next-higher limit. If building coverage is desired, the policy should be endorsed for building and contents coverage with a 30-day waiting period applied.

X. CONVERSION OF A NEWLY-MAPPED-RATED POLICY TO A STANDARD-RATED POLICY

A Newly-Mapped-rated policy must be canceled and rewritten as a standard-rated policy if the risk does not meet the Newly-Mapped-rated policy requirements on the policy effective date. (See the Eligibility Requirements subsection in this section.)

When converting a Newly-Mapped-rated policy to a standard-rated policy, all underwriting information must be obtained at the time of conversion, unless the information is contained in the underwriting file. The building and / or contents coverage on the new

standard-rated policy cannot exceed the building limit and/or contents limit issued under the Newly-Mapped-rated policy.

The policyholder will have 30 days from notification to pay the additional premium due, or 60 days from notification to obtain additional information if needed to rate the policy, and then 30 days to pay the additional premium due. The premium due will be

calculated from the beginning of the policy term to restore the originally requested limits without a waiting period. The policyholder has the option to reduce or delete coverage in order to wholly or partially reduce the underpayment amount.

If increased coverage limits are desired, the new standard-rated policy must be endorsed; the 30-day waiting period will apply.

**TABLE 3. COVERAGE LIMITS AND BASE PREMIUMS FOR PROPERTIES
NEWLY MAPPED INTO AN SFHA ON OR AFTER OCTOBER 1, 2008¹**

1-4 FAMILY RESIDENTIAL BUILDING AND CONTENTS COVERAGE COMBINATIONS

WITH BASEMENT OR ENCLOSURE ²			WITHOUT BASEMENT OR ENCLOSURE ²		
BUILDING	CONTENTS	PREMIUM	BUILDING	CONTENTS	PREMIUM
\$ 20,000	\$ 8,000	\$127	\$ 20,000	\$ 8,000	\$100
\$ 30,000	\$ 12,000	\$160	\$ 30,000	\$ 12,000	\$133
\$ 50,000	\$ 20,000	\$214	\$ 50,000	\$ 20,000	\$187
\$ 75,000	\$ 30,000	\$258	\$ 75,000	\$ 30,000	\$226
\$100,000	\$ 40,000	\$286	\$100,000	\$ 40,000	\$255
\$125,000	\$ 50,000	\$302	\$125,000	\$ 50,000	\$270
\$150,000	\$ 60,000	\$321	\$150,000	\$ 60,000	\$290
\$200,000	\$ 80,000	\$358	\$200,000	\$ 80,000	\$321
\$250,000	\$100,000	\$386	\$250,000	\$100,000	\$344

RESIDENTIAL CONTENTS-ONLY COVERAGE

CONTENTS ABOVE GROUND LEVEL MORE THAN 1 FLOOR		ALL OTHER LOCATIONS (BASEMENT-ONLY NOT ELIGIBLE)	
CONTENTS	PREMIUM	CONTENTS	PREMIUM
\$ 8,000	\$20	\$ 8,000	\$40
\$ 12,000	\$37	\$ 12,000	\$66
\$ 20,000	\$70	\$ 20,000	\$104
\$ 30,000	\$85	\$ 30,000	\$125
\$ 40,000	\$98	\$ 40,000	\$143
\$ 50,000	\$111	\$ 50,000	\$161
\$ 60,000	\$124	\$ 60,000	\$179
\$ 80,000	\$149	\$ 80,000	\$200
\$100,000	\$175	\$100,000	\$222

NOTE: Base Premium does not include the Multiplier, ICC Premium, Reserve Fund Assessment, HFIAA Surcharge, Probation Surcharge, or Federal Policy Fee. To determine the total amount due, refer to the Coverage and Premium subsection in this section of the manual.

- 1 Use this table for properties newly mapped into SFHA zones excluding AR and A99 on or after October 1, 2016.
- 2 Use this section of the table for buildings with crawlspaces or subgrade crawlspaces with an attached garage without proper openings.
- 3 Use this section of the table for buildings with crawlspaces or subgrade crawlspaces, including those with an attached garage, that have proper openings.